STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

	(See Reverse Side For Instructions)					L FILED
	This is a (check one)	Part	y Committee	XX	Political Action Committ	00 (0000
	This is an (check one)	Init	ial Statement		Amended Statement	001292002
COMMITTEE	-	(DI E A S	SE TYPE OI	DDTN	IT)	RON THORNBURG
Name	2	(ILDA	SE I I FE OI	V I ICII	(1)	
Citize	ens for Responsib	Le Govern	nment			14
Mailing Addre	ess (Street, City, State,	Zip Code)			Business Telepho	ne
P.O. Box	1201, Lawrence,	Kansas	66044		(785) 841-2	244
CHAIRPERSO	ON					
Name					Home Telephone	
Chris Mi	ller				(₇₈₅) 841-62	45
Mailing Addre	ss (Street, City, State,	Zip Code)			Business Telepho	ne
P.O. Box	1265, Lawrence,	Kansas	66044		(785) 841-6	245
TREASURER						
Name					Home Telephone	
Richard '	Todd				(785) 749-18	44
Mailing Addres	ss (Street, City, State,	Zip Code)			Business Telephor	ne .
P.O. Box	1042, Lawrence,	Kansas	66044		(785)691-55	57
AFFILIATED	OR CONNECTED OF	RGANIZA	TIONS			
Name	2				5.	-
Mailing Addres	ss (Street, City, State, 2	Zin Code)	20			
	(54004, 615), 51416, 1	or code)				
	100					
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governmen	t; opposing irres	ponsible			Ot. The state of t	to be elected
	political office	es;				
SIGNATURE:	nis statement has been	avaminad	by ma and to	the be	et of my lenovyladge	and
	rrect and complete. In					
	filing a false documen				7//	
October 28,		*	111	14:	(11:11	,
(Date)		-	(Signatur	re of C	hairperson)	<u> </u>
overnmental Et	thics Commission				-	Rev.2000